(a) whether Governments attention has been drawn to the news item which appeared in Indian Express dated lst July, 1993 under the caption Assam sleeps as AIDS comes in truck loads";

(h) whether Government are aware of the rising cases of AIDS in the State of Assam and lack of the detection facilities;

(c) whether Govenment have made any study with regard to the detection facilities available in Assam and the percentage of rise in the AIDScases in the during the last one year;

(d) if so, what are the details thereof stating the central assistance proposed to be given to the StateGovernment of Assam to check thespread of AIDS in the State; and

(e) what is the extent to which AIDS detection facilities in other States and Union Territories have been provided?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) Yes, Sir.

(b) and (c) With improvement in surveillance and better reporting, there is steady increase in the number of HIV cases being reported throughout the country. In, Assam one Surveillance Centre and three Zonal Blood Centres are fuctiong where adequate testing facilities are available.

(d) From the inception of the surveillance programme till 30.6.1993 only one. AIDS case has been reported from Assam. The total amount released to Assam for AIDS Control Programme during 1992-93 was Rs. 31.82 lakh. During 1993-94, Rs. 49.72 lakhs are proposed to be released to the State of Assam under the said programme.

(e) A total number of 62 surveillance centres and 1.18Zonal Blood Testing Centres havebeen functioning in the country where blood testing facilittiies are available. Tn addition, training activities have bees taken up in hand to improve the clinical diagnosis and management skills of the medical staff and other *allegories of health workers.*

Problem of Indian studeuts studying in Medical courses in countries of former Soviet Union

303. SHRI S. S. SURJEWALA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of the problem of Indian students studying in Medical Courses in former USSR and other countries;

(b) whether those students are not *getting admission in* Medical Colleges of India;

(c) if so, what steps Government have t aken/propose to take to obviate their problem; and

(d) whether future of these students is dark, if so, what steps are being taken by Government in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND); (a) Yes, Sir.

(b) to (d) The Medical Council of. India are considering the migration of students sponsored by the Council to the erstwhile U.S.S.R. for medical studies, subject to fulfilment of the criteria prescribed by the Council.

Total population in the country

304, SHRI RAMDAS AGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state;

(a) what is the total population of India as at present and what was in 1971, 1981 and 1991 indicating which States in India is *at* top in adopting small family norm and which States/ Union Territory is behind in this regard;

(b) what special programmes/guidelines have been announced by the Central Government on the occasion of

"World Population Day" which was observed on 11-7-1993; and

(c) what budgetary provision have been made in current financial year as well as during the Eighth Five Year plan period for *femly* planning programmes in the edantry particularly in Delhi with a population density of 6352 persons per sq. Metre?

THE MINISTER FOR HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) The total popula-tion of India as on 1.7.1993 is 8«3.9 million. The total population as enumerated in 1971, 1981 and 1991 Censuses is as follows;

Ceaus Year	Population (in million)
1971	548.2
1981	683.3
1991	846.3

Based on the estimates of Sample Registration System of Registrar General, India. available for the major States for I990, Kerela has the lowest family size With total fertility rate of 1,9, whereas Uttar Pradesh has the highest family *size* with total fertility rate of 5.2.

(b) Several programme were organised by the Centre, State and U. T. to promote awareness.

(c) An allocation of Rs. 6,500 Crores has been made for the implementation of Family Welfare Programme during the Eighth Five Year Plan. Budgetory provision made for 1993-94 at All India level and for Union Territory of Delhi are Rs 1270,00 Crores and Rs. 6.75 CMRS respectively.

Prephrution of moduls for familly Planing Programme for

305. SHRI RAMDAS AGARWAL: Will the Ministerof HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the National Institute of Health and Family Welfare *turn* prepared six models pertaining to family planning programmes as reported in the Hindustan Times dated the 14th July, 1993;

(b) if so, the details thereof and whether such models have been developed and supplied to Rajasthan and Crisses States for their Famify Planning Programm mes: and

(c) what are the names of the other Indian and Foreign. Institutes which have collaborated for the preparation of models?

THE MINISER OF HEALTH AND FAMILY WELFFARE (SHRI B. SHAN-(KARAMAND): (a) and (b) Yes, Sir. The six models prepared are:

(i) Consequences of Rapid Population Growth.

(ii) Cost Benefit Analysis of Family Programme in India.

(iii) Family Welfare and Health Planning Model.

(iv) Resource Allocation Model.

(v) Role of Birth Spacing Methods and

(vi) Strategy Options Model.

Out of these Models, (iv.) & (vi) are still to be finalise. Eight sets of slides of Models (i) and (ii) software and user's guide of model (iii) have been supplied to the Government of Rajasthan. No such exercise has been taken up of Orissa.

(c) Apart from the National Institute of Health and Family Welfare the collaborators are the Intternational Insctitute for Popolation Sciences, Bombay, Resares Triangle Instition, Research Triangle Park, (North Carolina, USA and the futures Group, Washington, DC, USA.

Expansion of acupunture in Hospitals.

306. SHRI SANGH PRIYA GAUTAM: DR. NAUNIHAL SINGH

Will the Minster of HEALTH AND FAMILY WaFARfi be. pleased to state: